down and their first promotion becomes due only after 5 1/2 years of service as against only after 4 1/2 years earlier;

(b) if so, what are the details of reduction in the starting salary, reduction in rank and increase in the required period of service before first promotion of Army Medical Corps Doctors;

(c) what was the reason for this step when scales of all other Government employees are being revised upwards; and

(d) whether Government proposed to restore status quoante with a view to providing incentives for Doctors to enter Army Medical Corps?

THE MINISTER OF STATE IN THE DEPARTMENT OF DEFENCE PRODUCTION AND SUPPLIES EST THE MINISTRY OF DEFENCE (SHRI CHINTAMANI PANIGRAHI): (a) to (c) No, Sir. The PAY scales of doctors in the Army Medical Corps (AMC) were revised on the recommendations of the Fourth Pay Commission, which were made effective from 1-1-86. Induction to the AMC is done in the rank of Lieutenant (pre-internship) or Captain (post-internship). In case of Lieutenant, the minimum starting pay is Rs. 2600/- and for those appointed as Captain it is Rs. 2700/-In case of officers who were in service on 31-12-85, as Captain, the pay was revised as on 1-1-86 and fixed at Rs. 2800/-. The number of years of service required for first promotion from the rank of Captain to Major was reduced from 6 years to 5 years, consequent o-n the Cadre Review finalised in 1985.

(d) No. Sir.

Central Assessment of Fibrosar Coma Disease in Sarguja District in Madhya Pradesh

765. SHRI MAHENDRA PRASAD: SHRI MURLIDHAR CHANDRA-KANT BHANDARE: DR. RATNAKAR PANDEY;

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a team of experts had recently been sent from the Centre to the predominantly tribal area of Sarguja district of Madhya Pradesh to assess the nature and extent of the disease fibrosar coma (Cancer);

(b) if so, what are the details of the report submitted by the team; and

(c) what action plan has been laid down in the light of the report?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) A team of experts from the National Institute oi Occupational Health, Ahmedabad, under the Indian Council of Medical Research was sent -o Sarguja district to assess the nature and extent of the disease fibrosar coma in the tribal area. The team visited Sarguja District Primary Health Centres. the Holy Cross Hospital, Ambikapur, District Hospital. Sarguja and State Health Directorate at Bhopal.

A total of 24 cases of fibrosar coma have been reported in the Holy Cross Hospital at Ambikapur in a period of 12 years i.e. from 1976 to 1988. The LCM.'R. is analysing the data.

Eighth Five Year Plan

766. SHRI CHITTA BASU:
SHRI SURENDRA SINGH THAKUR:

Will the Minister of PLANNING be pleased to state:

(a) whether the preparation for the Eighth Five Year Plan has since been comple'ed; and

(b) if so, what are the new thrusts of it as compared to the earlier ones?

THE MINISTER OF PLANNING AND PROGRAMME IMPLEMENTATION (SHRI MADHAVSINH SOLAN-KI): (a) and (b) The Five Year Plans are formulated through a well established

procedure beginning with the preparation of the Approach Paper and setting up of sectoral Working Groups/Steering Groups etc. A number of Working Groups/ Steering Groups for different sectors nave already been set up by the Planning Commission. The work on preparation of the Eighth Five Year Plan will be undertaken after the Approach Paper is finalised/ approved by the National Development Council.

Import of machines for treatment of Kidney Stones

SHRl N. e. BALARAM: SHRI GURUDAS DAs GUPTA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has beenn drawn to the news-items under the caption "Kidney stone-surgeons op pose machine imports" appearing in the Hindu dated th5 31st Decembe^ 1988; and

(b) if so, what is Government^ reac tion to the reservation expressed by the senior surgeons against the free imports and use of lithotipsy machines for treatmen; of kidney stones without surgery?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROI KHA PARDE): (a) Yes, Sir.

(b) The equipment is included under Open General Licence, list II Appendix (i of Imports Exports Policy 1988—91, as well as under the list given in the notification 65/88-Cus, dated 1-3-1988 for concession of custom duty exemption. Charitable and Semi-Charitable organisations approved by respective State Government are permitted 100 per cent cus-<om duty exemption on this item with approval of Export Committee including Urologistl'Nfiphrologist as member.

We have not received any corrnilaint from any patient or any surgeon or ne, phrologist so far. There is no lithotipsy machine in any Central Government Hospital. AlTMS is about to procure one.

Marketing of dangerous drags

768. SHRI BHAGATRAM MANHAR: DR. G. VIJAYA MOHAN REDDY:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Clioquinol, Analgin Dextro-prooxyphane, oxphenbutazone, Phenylbutazone, Femibutazone, Diiodohydroxyquinoline, Ethylestrenol, Nandrolone and Methandienone are being marketed in the country for human com sumption;

(b) whether it is also a fact that these are dangerous drugs and have been banned in a number of countries;

(c) if so, the details of dangerous effects came to the notice of Government; and

(d) the names of substitute drugs and what steps have been take^ to withdraw these drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir.

(b) While these drags are being mar keted in a number of countries, some countries have preferred to withdraw scmo of these drug's.

(c) and (d) The experts in the country have not considered these drugs as dangerous and have not recommended withdrawal of these druss.

Dextropropoxyphene, Oxyphenbutazone, Phenylbutazone, are analgesic|anti-infla' muatory drugs; Diodohydroyquinoline is an anti-amoebic drug; Ethyloestronol, Naodrnl one and Methandienone are anabolic drugs. Othp."- analgesias I anti-inflammatory dracs like Aspirin, Paracetamol, Tbuprofen at a also not free side effects. Similarly the other anti-amoebic drags like Metronidazole, Tinidazole, Ditoxanide, Emetine Vve. fhe'r own characteristic sid-effect^

The "'de effects of other androgens are very similar to that of Ethvloestrenol, Nandrolone and Methandienone.